Type of Inspection New Annual Follow-Up (Prev. Inspection Date) Complaint Courtesy Random

NCDA&CS, VETERINARY DIVISION ANIMAL WELFARE SECTION 1030 MAIL SERVICE CENTER, RALEIGH, NC 27699-1030 PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR OUTDOOR DOTH D



ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34 74321 W: 76 82210

BUSINESS NAME: S OWNER: G:JA ADDRESS: S370. TELEPHONE: (252) 20 VMO HUNTER COUNTY CASTES	1.11 Pet Shop #. 6eJT A Hwy 70 W. 1 10-1116	northead City NC	2853	~ ~ ~	
Number of Primary Enclosu	Inspector: Mark " Circle e	Animals Present: DogsX" in each box, if adequate ach item number, if inadec if not applicable	e. Juate.	Cats O Every Thing looks Good.	
STRUCTURE	SANI	TATION	SPECIAI	LITEMS	
Housing Facilities 1. Structure & Repair 2. Ventilation & Temp. 2. Lighting 4. Ceiling, Wall, Floors 5. Storage 6. Water Drainage		Waste Disposal Odor Ceiling, Wall, Floors Primary Enclosures Equipment & Supplies Washrooms, Sinks, Basins Insect/Vermin Control Building & Grounds	125. Re 126. Or 127. Sig 14428. W	escription of Animals cords/Vet Treatment igin/Disposition gnature (boarding kennel) ritten permission from wner for commingling loggie daycare)	
Primary Enclosures 7. Structure & Repair 8. Space 9. Ventilation & Temp. 10. Adequate Shelter	★19. ★20.	Adequate Feed/Water Food Storage Personnel Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area Animals' Appearance	¥ 29. Ca <u>Veterinar</u> ★ 30. Iso ★ 31. No	Transportation 29. Care in Transit Discussed Veterinary Care ✓ 30. Isolation Facility ✓ 31. No Signs of Illness/ Treated	
Inspector's	NDITIONALLY APPR Signature	toul	Date: A Cot ner/Authorize Pink= Owner	Mary Signature	

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